

REVOCATION AND NEW APPOINTMENT OF POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS		ATTORNEY DOCKET NO. 1013-022 US	
		U.S. APPLICATION SERIAL NO. 10/617,254	CONFIRMATION NO. 2427
		FILING DATE July 11, 2003	
INVENTOR(S) Myrtle THIERRY-PALMER		EXAMINER (If known) Leon B. LANKFORD, Jr.	ART UNIT (If known) 1651
TITLE OF APPLICATION METHOD FOR IDENTIFYING SALT-SENSITIVE PERSONS			

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I hereby revoke all previous powers of attorney given in the above-identified application.

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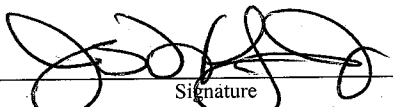
to transact all business in the U.S. Patent & Trademark Office in connection with this application.

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest (See 37 CFR 3.71). A statement under 37 CFR 3.73(b) is enclosed.

SIGNATURE of Assignee	
 <small>Signature</small> James W. HILLARD Morehouse School of Medicine <small>Printed or Typed Name</small>	9/10/10 <small>Date</small>

NOTE: Signatures of all of the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required.